BOE-260 (P1) REV. 09 (06-11) EXM-236 (REV. 10-19)

## CERTIFICATE AND AFFIDAVIT FOR EXEMPTION OF WORK OF ART

Declaration of costs and other related property information as of 12:01 a.m.,

January 1, 20\_\_\_\_

This claim must be filed by 5:00 p.m., February 15.



COUNTY OF LOS ANGELES • OFFICE OF THE ASSESSOR 500 WEST TEMPLE STREET ROOM 227

LOS ANGELES, CA 90012-2770 • Telephone 213.974.3481

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Si desea ayuda en Español, llame al número 213.974.3211

## AFFIDAVIT FOR EXEMPTION OF WORK OF ART

Under the provisions of section 217, Revenue and Taxation Code, certain articles of personal property which have been made available for display in a publicly owned art gallery or museum, or in a museum regularly open to the public and operated by a nonprofit organization qualified for exemption under section 23701d of the Revenue and Taxation Code for a minimum period of 90 days during the 12-month period immediately preceding January 1, or for less than 90 days immediately preceding January 1 but which will be made available for 90 days during the 12-month period commencing with the first day the property was made available, shall be exempt from taxation.

|   |  |                                    |                      | m taxation.                 | ty was ii                             | iade avaliable, shali be           |  |  |
|---|--|------------------------------------|----------------------|-----------------------------|---------------------------------------|------------------------------------|--|--|
| NAME OF CLAIMANT  |  |                                    |                      |                             |                                       |                                    |  |  |
|   |  |                                    |                      |                             |                                       |                                    |  |  |
| ADDRESS OF CLAIMANT   |  |                                    |                      |                             |                                       | DAYTIME TELEPHONE NUMBER           |  |  |
|   |  |                                    |                      |                             | (                                     | )                                  |  |  |
| LOCATION OF THE PERSONAL PROPERTY   | AS OF 12:01 A.M., JANUARY 1            |                                    |                      |                             |                                       |                                    |  |  |
|   |  |                                    |                      |                             |                                       |                                    |  |  |
| NAME OF ART GALLERY OR MUSEUM IN WHICH THE PROPERTY WAS MADE AVAILABLE FOR DISPLAY DIRECTOR'S OR OF |  |                                    |                      |                             |                                       |                                    |  |  |
|   |  |                                    |                      |                             |                                       |                                    |  |  |
| ADDRESS (Street, City, County, State, ZIP co  |  |                                    |                      |                             |                                       |                                    |  |  |
| ,,  |  |                                    |                      |                             |                                       |                                    |  |  |
| NATURE OF THE PERSONAL PROPERTY F   | OR WHICH EXEMPTION IS CLAIMED          | [check the appropriate box(e       | es); additional work | s of art may be listed on a | a separate si                         | heet, with nature and description] |  |  |
| ORIGINAL PAINTING   |  |                                    |                      |                             |                                       |                                    |  |  |
| ORIGINAL MOSAIC   | ORIGINAL STATUARY                      | ETCHING                            | LITHOGE              | RAPH                        |                                       |                                    |  |  |
| ORIGINAL DRAWING OR SKETCHES ENGRAVING PRINTS MADE BY HAND TRA                                      |  |                                    |                      |                             |                                       | SS                                 |  |  |
| _   |  | WOODCUT                            | OTHER (              | ORIGINAL WORK OF THE        | E FREE FINI                           | E ARTS                             |  |  |
| DESCRIBE THE PROPERTY AND THE PRO   | CESS BY WHICH IT WAS CREATED IN        | N SUFFICIENT DETAIL TO ID          | DENTIFY              |                             |                                       |                                    |  |  |
|   |  |                                    |                      |                             |                                       |                                    |  |  |
| DO THE ITEMS DESCRIBED ABOVE INCLU  | DE ARTICLES OF UTILITY OR ARTICL       | ES DESIGNED                        | DOES CLAIMAN         | T HOLD WORKS OF ART         | PRIMARILY                             | FOR PURPOSES OF SALE?              |  |  |
| FOR INDUSTRIAL USE?   | ☐ YES ☐ NO                             |                                    | YES                  | NO                          |                                       |                                    |  |  |
|   |  |                                    |                      |                             |                                       |                                    |  |  |
|   | CER                                    | TIFICATION OF CLA                  | NIMA NIT             |                             |                                       |                                    |  |  |
| I certify (or declare) under penal  |  |                                    |                      | foregoing and all is        | nformatio                             | n hereon including any             |  |  |
|   | statements or documents, is            |                                    |                      |                             |                                       |                                    |  |  |
| SIGNATURE OF PERSON MAKING CLAIM  | statements or documents, is            | TITLE                              | impiete to the       | Desi of my known            | cage and                              | DATE                               |  |  |
| DIGITAL OF T EROOM WARRING CEARS  |  |                                    |                      |                             |                                       | DATE                               |  |  |
| E-MAIL ADDRESS  |  |                                    |                      |                             |                                       |                                    |  |  |
| E-MAIE ADDINESS   |  |                                    |                      |                             |                                       |                                    |  |  |
|   |  |                                    |                      |                             |                                       |                                    |  |  |
|   | CERTIFICATION                          | OF MUSEUM DIRE                     | CTOR OR O            | FFICER                      |                                       |                                    |  |  |
| The work of art described above   | was made available for disp            | olay from                          | , 2                  | .0 to                       |                                       | , 20                               |  |  |
| (If additional works  | are listed on an attachment            | t, the director or office          | er must sign         | this certificate and        | l each att                            | achment.)                          |  |  |
| I certify (or declare) that   | t the information contained h          | erein is true correct              | and comple           | te to the best of m         | v knowle                              | dge and helief                     |  |  |
| SIGNATURE OF DIRECTOR OR OFFICER  | tino imormation contained in           | TITLE                              | , and compic         | 10 10 1110 0001 01 111      | , , , , , , , , , , , , , , , , , , , | DATE                               |  |  |
|   |  |                                    |                      |                             |                                       |                                    |  |  |
| DIRECTOR OR OFFICER OF (publicly owner  | d art gallery, museum or museum open t | l<br>to public and operated by a n | onprofit organizati  | on)                         |                                       |                                    |  |  |
|   |  |                                    |                      |                             |                                       |                                    |  |  |
| LOCATED AT (address)  |  |                                    |                      |                             |                                       |                                    |  |  |
|   |  |                                    |                      |                             |                                       |                                    |  |  |
| EMAIL ADDRESS   |  |                                    |                      |                             |                                       |                                    |  |  |
|   |  |                                    |                      |                             |                                       |                                    |  |  |